## MOU COVER SHEET FOR AN INTERGOVERNMENTAL AGREEMENT (MOU)

## Check items or fill in the blanks, as appropriate:

Check items of im in	tile blanks,	as appropr	iate.					
ADPICS BPO #:				FMIS Appropriation Code: M00				
Previous OPASS #:				New:				
Fixed Price:				Cost Reimbursement:				
DHMH Admin or Facility:				FMIS Department Code: M				
Address:								
Unit Contract Monitor:								
Phone:				Email:				
Government Entity:				FEIN/ADPICS Mail Code:				
Address:								
Government Entity Cor	ntact Person	1:						
Phone:				Email:				
Amount:	\$		PCA		Agency Object			
Fiscal Year	FY		FY	FY	FY		FY	
Breakdown:	\$		\$	\$	\$		\$	
Funding	General:		Federal:	*Special Funds:	Reimbursable:		Non Budgeted:	
Source:	%		%	%	%		%	
Start Date:				End Date:				
Options:  Start: Start: Start: Start:		Start:		End:		Amount:		
		Start:		End:		Amount:		
		Start:		End:		Amount:		
		Start:		End:		Amount:		
Description of Services	:							
*Source of Special Fun	ds:							
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Submit Procurement Package to OPASS at the address provided above. The Procurement Package must be complete and organized according to the specifications provided herewith.

## **Check if present/completed:**

DBM attachment (if applicable)		
Completed Cover Sheet		
Three MOUs* with original signatures of the Government Entity		
Fund Certification		
Late Justification Letter (if applicable)		
Interagency Report (if with an institution of higher education and \$100,000 or more)		

I attest to the accuracy and completeness of this Procurement Package:

Type/Print Name of Procurement Coordinator Phone	Signature of Procurement Coordinator/Date
Type/Print Name of Procurement Coordinator's Supervisor	Supervisor's email

An email acknowledging receipt of this package will be sent to the DHMH Procurement Coordinator.

<sup>\*</sup>The MOU must contain a budget breakdown which explains indirect costs treatment. This should also contain any full or part-time positions funded through this agreement.